



**1<sup>st</sup> International Conference on  
Medical Ethics: "Ethics in Challenging Times"**  
20<sup>th</sup> & 21<sup>st</sup> of March 2017  
at  
**University of Health Sciences Lahore, Pakistan**

### Registration Form

**Part-I: Bio-Data**

Name	
Father's Name	
PMDC Registration No.	
Designation / Job Title	
Institution	
Faculty/School/Centre	
Department/Hospital	
Address	
City/State	
Zip/Postal Code	
Country	
Landline	
Cell	
Fax	
Email	
Alternative Email	

**Part-II: Registration Charges**

Category		Registration fee			
		Before 15 <sup>th</sup> March 2017		After 15 <sup>th</sup> March 2017	
Please check the relevant box		PKR	US\$	PKR	US\$
National Faculty/Staff	w	500		1000	
International	w		100		150
Postgraduate students	w	500		1000	
Undergraduate students	w	500		500	
<b>Total Amount</b>					

**Part-III: Mode of Payment**

Registration is on a first-come first-served basis upon receipt of full payment.  
(Seats are confirmed upon receipt of Payment)

Please make your Bank Draft payable to **"UHS CONFERENCE & WORKSHOP"**

**Account No.** CD-0045610001

**Beneficiary.** University of Health Sciences (UHS)

**Branch:** The Bank of Punjab, Ayubia Market, New Muslim Town, Lahore.

**Branch Code:** 0043 **Bank's Phone No:** 92-42-99231236

**Mail your Registration Form along with Bank Draft at the given address:**

Room No.40, First Floor, University of Health Sciences (UHS)

Khayaban-e-Jamia Punjab, University Road

Lahore - 54600, Pakistan

Tel: 042-99239523

**Cancellation Policy**

Any cancellation or replacement must be conveyed to the organizers in writing. Cancellation charges of 50% fee will be levied if the cancellation is received on or before 15<sup>th</sup> March 2017. There will be no fee refund if the cancellation is received after 15<sup>th</sup> March 2017.

**Part-IV: Acknowledgment**

Please send us an email/Fax to confirm your registration and detail of posted bank draft. Confirmation on your registration will be sent to you when we will receive your full payment. An official receipt will be sent to you within 05 working days upon receipt of payment. For any query regarding you registration, please contact at the following address:

**Conference Secretariat:**

University of Health Sciences Lahore

Khayaban-e-Jamia Punjab, Lahore – 54600 – Pakistan

Phone No.+92 42 99231305-09, Fax No.: +92 42 99230870

E-mail: info@uhs.edu.pk

Website: www.uhs.edu.pk